

Please type a plus sign (+) inside this box →

PTO/SB/01 (12-97)

Approved for use through 9/30/00. OMB 0651-0032

Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE  
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.



DEC 24 2003

**DECLARATION FOR UTILITY OR  
DESIGN  
PATENT APPLICATION  
(37 CFR 1.63)**

Declaration  
Submitted  
with Initial  
Filing

OR

Declaration  
Submitted after Initial  
Filing (surcharge  
(37 CFR 1.16 (e))  
required)

Attorney Docket Number	OC01617K
First Named Inventor	Timothy J. Guzi
COMPLETE IF KNOWN	
Application Number	10 / 654,546
Filing Date	09/03/2003
Group Art Unit	
Examiner Name	

**As a below named inventor, I hereby declare that:**

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**NOVEL PYRAZOLOPYRIMIDINES AS CYCLIN DEPENDENT KINASE INHIBITORS**

the specification of which

*(Title of the Invention)*

Is attached hereto

OR

was filed on (MM/DD/YYYY)  as United States Application Number or PCT International

Application Number  and was amended on (MM/DD/YYYY)  (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT International application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES	Certified Copy Attached? NO
			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	
60/408,027	09/04/2002	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.
60/421,959	10/29/2002	

[Page 1 of 2]

Express Mail Label No.

Date

Please type a plus sign (+) inside this box → **DECLARATION — Utility or Design Patent Application**

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (If applicable)

Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:  Customer Number  →  Place Customer Number Bar Code Label here  
 Registered practitioner(s) name/registration number listed below

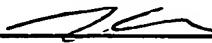
Name	Registration Number	Name	Registration Number

Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

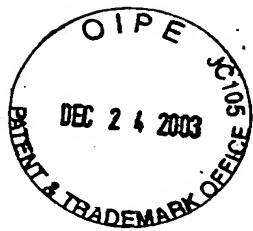
Direct all correspondence to:  Customer Number or Bar Code Label  OR  Correspondence address below

Name	Palaiyur S. Kalyanaraman	Reg. No. 28,605
Address		
Address		
City	State	ZIP
Country	Telephone	Fax

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:	<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any])		Family Name or Surname	
Timothy J.		Guzi	
Inventor's Signature			Date <input type="text" value="08/11/02"/>
Residence: City	Chatham	State <input type="text" value="NJ"/>	Country <input type="text" value="USA"/>
Post Office Address	48 Red Road		
Post Office Address			
City	Chatham	State <input type="text" value="NJ"/>	ZIP <input type="text" value="07928"/>
Country			USA

Additional inventors are being named on the  supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto



Please type a plus sign (+) inside this box →

PTO/SB/02A (11-00)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

## DECLARATION

### ADDITIONAL INVENTOR(S) Supplemental Sheet Page 1 of 6

<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Kamil	Paruch		
Inventor's Signature			Date <u>09/11/03</u>
Residence: City Garwood	State NJ	Country USA	Citizenship Czech Republic
Mailing Address 20 Third Avenue			
Mailing Address			
City Garwood	State NJ	ZIP 07027	Country USA
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Michael P.	Dwyer		
Inventor's Signature	<u>Michael P. Dwyer</u>		Date <u>09/11/03</u>
Residence: City Scotch Plains	State NJ	Country USA	Citizenship USA
Mailing Address 235 Katherine Street			
Mailing Address			
City Scotch Plains	State NJ	ZIP 07076	Country USA
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Ronald J.	Doll		
Inventor's Signature	<u>Ronald J. Doll</u>		Date <u>9-11-07</u>
Residence: City Convent Station	State NJ	Country USA	Citizenship USA
Mailing Address 8 Concord Lane			
Mailing Address			
City Convent Station	State NJ	ZIP 07960	Country USA

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Please type a plus sign (+) inside this box →

PTO/SB/02A (11-00)

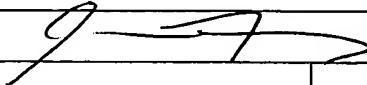
Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

## DECLARATION

### ADDITIONAL INVENTOR(S) Supplemental Sheet Page 2 of 6

<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Viyoor M.		Girijavallabhan	
Inventor's Signature			Date <u>9/11/03</u>
Residence: City Parsippany	State NJ	Country USA	Citizenship USA
Mailing Address 10 Maplewood Drive			
Mailing Address			
City Parsippany	State NJ	ZIP 07054	Country USA
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Alan		Mallams	
Inventor's Signature			Date <u>9/11/03</u>
Residence: City Hackettstown	State NJ	Country USA	Citizenship USA
Mailing Address 147 Kings Highway, RR3			
Mailing Address			
City Hackettstown	State NJ	ZIP 07840	Country USA
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Carmen S.		Alvarez	
Inventor's Signature			Date <u>9/11/03</u>
Residence: City Livingston	State NJ	Country USA	Citizenship USA
Mailing Address 121 Walnut Street			
Mailing Address			
City Livingston	State NJ	ZIP 07039	Country USA

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Please type a plus sign (+) inside this box →

PTO/SB/02A (11-00)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

## DECLARATION

### ADDITIONAL INVENTOR(S) Supplemental Sheet Page 3 of 6

<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Kartik M.		Keertikar	
Inventor's Signature			Date <u>9/11/03</u>
Residence: City East Windsor	State NJ	Country USA	Citizenship INDIA
<b>Mailing Address</b> 24 Columbia Avenue			
<b>Mailing Address</b>			
City East Windsor	State NJ	ZIP 08520	Country USA
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Jocelyn		Rivera	
Inventor's Signature			Date
Residence: City Monmouth Junction	State NJ	Country USA	Citizenship USA
<b>Mailing Address</b> 72 Regal Drive			
<b>Mailing Address</b>			
City Monmouth Junction	State NJ	ZIP 08852	Country USA
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Tin-Yau		Chan	
Inventor's Signature			Date <u>9/11/2003</u>
Residence: City Edison	State NJ	Country USA	Citizenship Hong Kong
<b>Mailing Address</b> 26 Barlow Road			
<b>Mailing Address</b>			
City Edison	State NJ	ZIP 08817	Country USA

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Please type a plus sign (+) inside this box →

PTO/SB/02A (11-00)

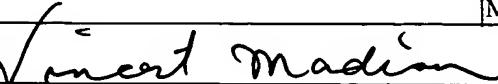
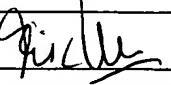
Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

## DECLARATION

### ADDITIONAL INVENTOR(S) Supplemental Sheet Page 4 of 6

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Vincent		Madison	
Inventor's Signature			Date <u>9-11-03</u>
Residence: City Mountain Lakes	State NJ	Country USA	Citizenship USA
Mailing Address 12 Ronarm Drive			
Mailing Address			
City Mountain Lakes	State NJ	ZIP 07046	Country USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Thierry O.		Fischmann	
Inventor's Signature			Date <u>9/11/2003</u>
Residence: City Scotch Plains	State NJ	Country USA	Citizenship USA
Mailing Address 2700 Sky Top Drive			
Mailing Address			
City Scotch Plains	State NJ	ZIP 07076	Country USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Lawrence W.		Dillard	
Inventor's Signature			Date
Residence: City Skillman	State NJ	Country USA	Citizenship USA
Mailing Address 278 Spring Hill Road			
Mailing Address			
City Skillman	State NJ	ZIP 08558	Country USA

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Please type a plus sign (+) inside this box →

PTO/SB/02A (11-00)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

## DECLARATION

### ADDITIONAL INVENTOR(S) Supplemental Sheet Page 5 of 6

<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Vinh D.		Tran	
Inventor's Signature		Date	
Residence: City Fountain Valley	State CA	Country USA	Citizenship USA
Mailing Address 17374 Winemast Street			
Mailing Address			
City Fountain Valley	State CA	ZIP 92708	Country USA
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Zhen Min		He	
Inventor's Signature		Date	
Residence: City Princeton	State NJ	Country USA	Citizenship USA
Mailing Address 5 Pennyroyal Court			
Mailing Address			
City Princeton	State NJ	ZIP 08540	Country USA
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Ray Anthony		James	
Inventor's Signature		Date	
Residence: City Bristol	State PA	Country USA	Citizenship USA
Mailing Address 1036 Radcliffe Street			
Mailing Address			
City Bristol	State PA	ZIP 19007	Country USA

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Please type a plus sign (+) inside this box →

PTO/SB/02A (11-00)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

## DECLARATION

### ADDITIONAL INVENTOR(S) Supplemental Sheet Page 6 of 6

<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Haengsoon		Park	
Inventor's Signature		Date	
Residence: City Plainsboro	State NJ	Country USA	Citizenship Rep. of Korea
Mailing Address 8910 Tamarron Drive			
Mailing Address			
City Plainsboro	State NJ	ZIP 08536	Country USA
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Vidyadhar M.		Paradkar	
Inventor's Signature		Date	
Residence: City Somerville	State NJ	Country USA	Citizenship USA
Mailing Address 3 Pine Ridge Drive			
Mailing Address			
City Somerville	State NJ	ZIP 08876	Country USA
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Douglas Walsh		Hobbs	
Inventor's Signature		Date	
Residence: City Yardley	State PA	Country USA	Citizenship USA
Mailing Address 1330 University Drive			
Mailing Address			
City Yardley	State PA	ZIP 19067	Country USA

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Please type a plus sign (+) inside this box →

PTO/SB/01 (12-97)

Approved for use through 9/30/00. OMB 0651-0032

Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE  
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.



**DECLARATION FOR UTILITY OR  
DESIGN  
PATENT APPLICATION  
(37 CFR 1.63)**

Declaration  
Submitted  
with Initial  
Filing

OR

Declaration  
Submitted after Initial  
Filing (surcharge  
(37 CFR 1.16 (e))  
required)

Attorney Docket Number	OC01617K
First Name of Inventor	Timothy J. Guzi
COMPLETE IF KNOWN	
Application Number	10 / 654,546
Filing Date	09/03/2003
Group Art Unit	
Examiner Name	

As a below named Inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**NOVEL PYRAZOLOPYRIMIDINES AS CYCLIN DEPENDENT KINASE INHIBITORS**

the specification of which

*(Title of the Invention)*

is attached hereto

OR

was filed on (MM/DD/YYYY)

as United States Application Number or PCT International

Application Number  and was amended on (MM/DD/YYYY)  (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT International application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT International application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES	Certified Copy Attached? NO
			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.
60/408,027	09/04/2002	
60/421,959	10/29/2002	

[Page 1 of 2]

Express Mail Label No.

Date

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

## DECLARATION — Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)	
<input type="checkbox"/> Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.			
As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: <input checked="" type="checkbox"/> Customer Number <span style="border: 1px solid black; padding: 2px;">24265</span> → <span style="border: 1px solid black; padding: 2px;">Place Customer Number Bar Code Label here</span> <input type="checkbox"/> OR <input type="checkbox"/> Registered practitioner(s) name/registration number listed below			
Name	Registration Number	Name	Registration Number

<input type="checkbox"/> Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.				
Direct all correspondence to: <input checked="" type="checkbox"/> Customer Number or Bar Code Label <span style="border: 1px solid black; padding: 2px;">24265</span> OR <input type="checkbox"/> Correspondence address below				
Name	Palaiyur S. Kalyanaraman Reg. No. 28,605			
Address				
Address				
City	State	ZIP		
Country	Telephone	(908) 298-2908	Fax	(908) 298-5388

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle if any)		Family Name or Surname					
Timothy J.		Guzi					
Inventor's Signature				Date			
Residence: City	Chatham	State	NJ	Country	USA	Citizenship	USA
Post Office Address	48 Red Road						
Post Office Address							
City	Chatham	State	NJ	ZIP	07928	Country	USA
<input checked="" type="checkbox"/> Additional inventors are being named on the <u>6</u> supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto							



Please type a plus sign (+) inside this box →

PTO/SB/02A (11-00)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

## DECLARATION

### ADDITIONAL INVENTOR(S) Supplemental Sheet Page 1 of 6

<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Kamil		Paruch	
Inventor's Signature		Date	
Residence: City Garwood	State NJ	Country USA	Citizenship Czech Republic
Mailing Address 20 Third Avenue			
Mailing Address			
City Garwood	State NJ	ZIP 07027	Country USA
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Michael P.		Dwyer	
Inventor's Signature		Date	
Residence: City Scotch Plains	State NJ	Country USA	Citizenship USA
Mailing Address 235 Katherine Street			
Mailing Address			
City Scotch Plains	State NJ	ZIP 07076	Country USA
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Ronald J.		Doll	
Inventor's Signature		Date	
Residence: City Convent Station	State NJ	Country USA	Citizenship USA
Mailing Address 8 Concord Lane			
Mailing Address			
City Convent Station	State NJ	ZIP 07960	Country USA

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.



Please type a plus sign (+) inside this box →

PTO/SB/02A (11-00)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

## DECLARATION

### ADDITIONAL INVENTOR(S) Supplemental Sheet Page 2 of 6

<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Viyoor M.		Girijavallabhan	
Inventor's Signature		Date	
Residence: City Parsippany	State NJ	Country USA	Citizenship USA
Mailing Address 10 Maplewood Drive			
Mailing Address			
City Parsippany	State NJ	ZIP 07054	Country USA
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Alan		Mallams	
Inventor's Signature		Date	
Residence: City Hackettstown	State NJ	Country USA	Citizenship USA
Mailing Address 147 Kings Highway, RR3			
Mailing Address			
City Hackettstown	State NJ	ZIP 07840	Country USA
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Carmen S.		Alvarez	
Inventor's Signature		Date	
Residence: City Livingston	State NJ	Country USA	Citizenship USA
Mailing Address 121 Walnut Street			
Mailing Address			
City Livingston	State NJ	ZIP 07039	Country USA

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.



Please type a plus sign (+) inside this box →

PTO/SB/02A (11-00)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

## DECLARATION

### ADDITIONAL INVENTOR(S) Supplemental Sheet Page 3 of 6

<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Kartik M.		Keertikar	
Inventor's Signature		Date	
Residence: City East Windsor	State NJ	Country USA	Citizenship INDIA
Mailing Address 24 Columbia Avenue			
Mailing Address			
City East Windsor	State NJ	ZIP 08520	Country USA
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Jocelyn		Rivera	
Inventor's Signature		Date	
Residence: City Monmouth Junction	State NJ	Country USA	Citizenship USA
Mailing Address 72 Regal Drive			
Mailing Address			
City Monmouth Junction	State NJ	ZIP 08852	Country USA
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Tin-Yau		Chan	
Inventor's Signature		Date	
Residence: City Edison	State NJ	Country USA	Citizenship Hong Kong
Mailing Address 26 Barlow Road			
Mailing Address			
City Edison	State NJ	ZIP 08817	Country USA

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Please type a plus sign (+) inside this box →

PTO/SB/02A (11-00)

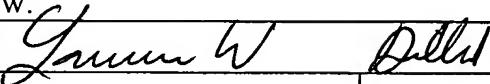
Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

## DECLARATION

### ADDITIONAL INVENTOR(S) Supplemental Sheet Page 4 of 6

<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Vincent		Madison	
Inventor's Signature		Date	
Residence: City Mountain Lakes	State NJ	Country USA	Citizenship USA
Mailing Address 12 Ronarm Drive			
Mailing Address			
City Mountain Lakes	State NJ	ZIP 07046	Country USA
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Thierry O.		Fischmann	
Inventor's Signature		Date	
Residence: City Scotch Plains	State NJ	Country USA	Citizenship USA
Mailing Address 2700 Sky Top Drive			
Mailing Address			
City Scotch Plains	State NJ	ZIP 07076	Country USA
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Lawrence W.		Dillard	
Inventor's Signature 		Date 10/9/2003	
Residence: City Skillman	State NJ	Country USA	Citizenship USA
Mailing Address 278 Spring Hill Road			
Mailing Address			
City Skillman	State NJ	ZIP 08558	Country USA

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Please type a plus sign (+) inside this box →

PTO/SB/02A (11-00)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

## DECLARATION

### ADDITIONAL INVENTOR(S) Supplemental Sheet Page 5 of 6

<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Vinh D.		Tran	
Inventor's Signature		Date	
Residence: City Fountain Valley	State CA	Country USA	Citizenship USA
Mailing Address 17374 Winemast Street			
Mailing Address			
City Fountain Valley	State CA	ZIP 92708	Country USA
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Zhen Min		He	
Inventor's Signature			Date 9-29-03
Residence: City Princeton	State NJ	Country USA	Citizenship USA
Mailing Address 5 Pennyroyal Court			
Mailing Address			
City Princeton	State NJ	ZIP 08540	Country USA
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Ray Anthony		James	
Inventor's Signature			Date 9/25/03
Residence: City Bristol	State PA	Country USA	Citizenship USA
Mailing Address 1036 Radcliffe Street			
Mailing Address			
City Bristol	State PA	ZIP 19007	Country USA

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Please type a plus sign (+) inside this box →

PTO/SB/02A (11-00)

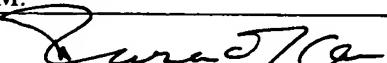
Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

## DECLARATION

### ADDITIONAL INVENTOR(S) Supplemental Sheet Page 6 of 6

<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Haengsoon		Park	
Inventor's Signature			Date <u>9/25/03</u>
Residence: City Plainsboro	State NJ	Country USA	Citizenship Rep. of Korea
<b>Mailing Address</b> 8910 Tamarron Drive			
<b>Mailing Address</b>			
City Plainsboro	State NJ	ZIP 08536	Country USA
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Vidyadhar M.		Paradkar	
Inventor's Signature			Date <u>9/25/03</u>
Residence: City Somerville	State NJ	Country USA	Citizenship USA
<b>Mailing Address</b> 3 Pine Ridge Drive			
<b>Mailing Address</b>			
City Somerville	State NJ	ZIP 08876	Country USA
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Douglas Walsh		Hobbs	
Inventor's Signature			Date <u>Sept 25, 2003</u>
Residence: City Yardley	State PA	Country USA	Citizenship USA
<b>Mailing Address</b> 1330 University Drive			
<b>Mailing Address</b>			
City Yardley	State PA	ZIP 19067	Country USA

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Please type a plus sign (+) inside this box →

PTO/SB/01 (12-97)

Approved for use through 9/30/00. OMB 0651-0032

Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

O P E  
SCT 105  
DEC 24 2003  
PATENT & TRADEMARK OFFICE

## DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)

Declaration Submitted with Initial Filing      OR       Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number	OC01617K
First Named Inventor	Timothy J. Guzi
COMPLETE IF KNOWN	
Application Number	10 / 654,546
Filing Date	09/03/2003
Group Art Unit	
Examiner Name	

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

### NOVEL PYRAZOLOPYRIMIDINES AS CYCLIN DEPENDENT KINASE INHIBITORS

the specification of which

(Title of the Invention)

is attached hereto

OR

was filed on (MM/DD/YYYY)  as United States Application Number or PCT International

Application Number  and was amended on (MM/DD/YYYY)  (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES	Certified Copy Attached? NO
			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	
60/408,027	09/04/2002	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.
60/421,959	10/29/2002	

[Page 1 of 2]

Express Mail Label No.

Date

Please type a plus sign (+) inside this box → 

Approved for use through 9/30/00. OMB 0651-0032

Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

## DECLARATION — Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:  Customer Number  →  Place Customer Number Bar Code Label here  
OR  
 Registered practitioner(s) name/registration number listed below

Name	Registration Number	Name	Registration Number

Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to:  Customer Number or Bar Code Label  OR  Correspondence address below

Name	Palaiyur S. Kalyanaraman	Reg. No. 28,605			
Address					
Address					
City		State		ZIP	
Country	Telephone	(908) 298-2908		Fax	(908) 298-5388

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:	<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name (first and middle if any)			Family Name or Surname		
Timothy J.	Guzi				
Inventor's Signature					
Residence: City	Chatham	State	NJ	Country	USA
Post Office Address	48 Red Road				
Post Office Address					
City	Chatham	State	NJ	ZIP	07928
				Country	USA

Additional inventors are being named on the 6 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto



Please type a plus sign (+) inside this box →

PTO/SB/02A (11-00)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

## DECLARATION

## ADDITIONAL INVENTOR(S) Supplemental Sheet Page 1 of 6

<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Kamil		Paruch	
Inventor's Signature		Date	
Residence: City Garwood	State NJ	Country USA	Citizenship Czech Republic
Mailing Address 20 Third Avenue			
Mailing Address			
City Garwood	State NJ	ZIP 07027	Country USA
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Michael P.		Dwyer	
Inventor's Signature		Date	
Residence: City Scotch Plains	State NJ	Country USA	Citizenship USA
Mailing Address 235 Katherine Street			
Mailing Address			
City Scotch Plains	State NJ	ZIP 07076	Country USA
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Ronald J.		Doll	
Inventor's Signature		Date	
Residence: City Convent Station	State NJ	Country USA	Citizenship USA
Mailing Address 8 Concord Lane			
Mailing Address			
City Convent Station	State NJ	ZIP 07960	Country USA

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Please type a plus sign (+) inside this box →

PTO/SB/02A (11-00)

Approved for use through 10/31/2002. OMB 0651-0032  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

## DECLARATION

## ADDITIONAL INVENTOR(S) Supplemental Sheet Page 2 of 6

<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Viyyoor M.		Girijavallabhan	
Inventor's Signature		Date	
Residence: City Parsippany	State NJ	Country USA	Citizenship USA
<b>Mailing Address</b> 10 Maplewood Drive			
<b>Mailing Address</b>			
City Parsippany	State NJ	ZIP 07054	Country USA
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Alan		Mallams	
Inventor's Signature		Date	
Residence: City Hackettstown	State NJ	Country USA	Citizenship USA
<b>Mailing Address</b> 147 Kings Highway, RR3			
<b>Mailing Address</b>			
City Hackettstown	State NJ	ZIP 07840	Country USA
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Carmen S.		Alvarez	
Inventor's Signature		Date	
Residence: City Livingston	State NJ	Country USA	Citizenship USA
<b>Mailing Address</b> 121 Walnut Street			
<b>Mailing Address</b>			
City Livingston	State NJ	ZIP 07039	Country USA

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Please type a plus sign (+) inside this box →

PTO/SB/02A (11-00)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

## DECLARATION

### ADDITIONAL INVENTOR(S) Supplemental Sheet Page 3 of 6

<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Kartik M.		Keertikar	
Inventor's Signature		Date	
Residence: City East Windsor	State NJ	Country USA	Citizenship INDIA
Mailing Address 24 Columbia Avenue			
Mailing Address			
City East Windsor	State NJ	ZIP 08520	Country USA
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Jocelyn		Rivera	
Inventor's Signature <i>Jocelyn M. Rivera</i>		Date 10/07/03	
Residence: City Monmouth Junction	State NJ	Country USA	Citizenship USA
Mailing Address 72 Regal Drive			
Mailing Address			
City Monmouth Junction	State NJ	ZIP 08852	Country USA
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Tin-Yau		Chan	
Inventor's Signature		Date	
Residence: City Edison	State NJ	Country USA	Citizenship Hong Kong
Mailing Address 26 Barlow Road			
Mailing Address			
City Edison	State NJ	ZIP 08817	Country USA

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Please type a plus sign (+) inside this box →

PTO/SB/02A (11-00)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

## DECLARATION

## ADDITIONAL INVENTOR(S) Supplemental Sheet Page 4 of 6

<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Vincent		Madison	
Inventor's Signature		Date	
Residence: City Mountain Lakes	State NJ	Country USA	Citizenship USA
Mailing Address 12 Ronarm Drive			
Mailing Address			
City Mountain Lakes	State NJ	ZIP 07046	Country USA
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Thierry O.		Fischmann	
Inventor's Signature		Date	
Residence: City Scotch Plains	State NJ	Country USA	Citizenship USA
Mailing Address 2700 Sky Top Drive			
Mailing Address			
City Scotch Plains	State NJ	ZIP 07076	Country USA
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Lawrence W.		Dillard	
Inventor's Signature		Date	
Residence: City Skillman	State NJ	Country USA	Citizenship USA
Mailing Address 278 Spring Hill Road			
Mailing Address			
City Skillman	State NJ	ZIP 08558	Country USA

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Please type a plus sign (+) inside this box →

PTO/SB/02A (11-00)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

## DECLARATION

## ADDITIONAL INVENTOR(S) Supplemental Sheet Page 5 of 6

<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Vinh D.		Tran	
Inventor's Signature		Date	
Residence: City Fountain Valley	State CA	Country USA	Citizenship USA
Mailing Address 17374 Winemast Street			
Mailing Address			
City Fountain Valley	State CA	ZIP 92708	Country USA
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Zhen Min		He	
Inventor's Signature		Date	
Residence: City Princeton	State NJ	Country USA	Citizenship USA
Mailing Address 5 Pennyroyal Court			
Mailing Address			
City Princeton	State NJ	ZIP 08540	Country USA
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Ray Anthony		James	
Inventor's Signature		Date	
Residence: City Bristol	State PA	Country USA	Citizenship USA
Mailing Address 1036 Radcliffe Street			
Mailing Address			
City Bristol	State PA	ZIP 19007	Country USA

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Please type a plus sign (+) inside this box →

PTO/SB/02A (11-00)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

## DECLARATION

## ADDITIONAL INVENTOR(S) Supplemental Sheet Page 6 of 6

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Haengsoon		Park	
Inventor's Signature		Date	
Residence: City Plainsboro	State NJ	Country USA	Citizenship Rep. of Korea
Mailing Address 8910 Tamarron Drive			
Mailing Address			
City Plainsboro	State NJ	ZIP 08536	Country USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Vidyadhar M.		Paradkar	
Inventor's Signature		Date	
Residence: City Somerville	State NJ	Country USA	Citizenship USA
Mailing Address 3 Pine Ridge Drive			
Mailing Address			
City Somerville	State NJ	ZIP 08876	Country USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Douglas Walsh		Hobbs	
Inventor's Signature		Date	
Residence: City Yardley	State PA	Country USA	Citizenship USA
Mailing Address 1330 University Drive			
Mailing Address			
City Yardley	State PA	ZIP 19067	Country USA

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

O I P E  
S E C T O R  
P A T E N T & T R A D E M A R K  
O F F I C E S

DEC 24 2003

Please type a plus sign (+) inside this box →

PTO/SB/01 (12-97)

Approved for use through 9/30/00. OMB 0651-0032

Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

**DECLARATION FOR UTILITY OR  
DESIGN  
PATENT APPLICATION  
(37 CFR 1.63)**

Declaration  
Submitted  
with Initial  
Filing

OR

Declaration  
Submitted after Initial  
Filing (surcharge  
(37 CFR 1.16 (e))  
required)

Attorney Docket Number	OC01617K
First Named Inventor	Timothy J. Guzi
<b>COMPLETE IF KNOWN</b>	
Application Number	10 / 654,546
Filing Date	09/03/2003
Group Art Unit	
Examiner Name	

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**NOVEL PYRAZOLOPYRIMIDINES AS CYCLIN DEPENDENT KINASE INHIBITORS**

the specification of which

*(Title of the Invention)*

Is attached hereto

OR

was filed on (MM/DD/YYYY)

as United States Application Number or PCT International

Application Number  and was amended on (MM/DD/YYYY)  (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT International application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES	Certified Copy Attached? NO
			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	
60/408,027	09/04/2002	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.
60/421,959	10/29/2002	

[Page 1 of 2]

Express Mail Label No.

Date

Please type a plus sign (+) inside this box → 

Approved for use through 9/30/00. OMB 0651-0032

Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

## DECLARATION — Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT International application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (If applicable)

Additional U.S. or PCT International application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:  Customer Number  →  Place Customer Number Bar Code Label here  
 OR  
 Registered practitioner(s) name/registration number listed below

Name	Registration Number	Name	Registration Number

Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

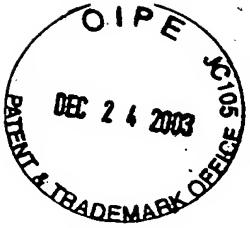
Direct all correspondence to:  Customer Number or Bar Code Label  OR  Correspondence address below

Name	Palaiyur S. Kalyanaraman			Reg. No. 28,605		
Address						
Address						
City		State		ZIP		
Country		Telephone	(908) 298-2908	Fax	(908) 298-5388	

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:	<input type="checkbox"/> A petition has been filed for this unsigned inventor						
Given Name (first and middle if any)			Family Name or Surname				
Timothy J.			Guzi				
Inventor's Signature						Date	
Residence: City	Chatham	State	NJ	Country	USA	Citizenship	USA
Post Office Address	48 Red Road						
Post Office Address							
City	Chatham	State	NJ	ZIP	07928	Country	USA

Additional inventors are being named on the 6 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto



Please type a plus sign (+) inside this box →

PTO/SB/02A (11-00)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

## DECLARATION

### ADDITIONAL INVENTOR(S) Supplemental Sheet Page 1 of 6

<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Kamil		Paruch	
Inventor's Signature		Date	
Residence: City Garwood	State NJ	Country USA	Citizenship Czech Republic
<b>Mailing Address</b> 20 Third Avenue			
<b>Mailing Address</b>			
City Garwood	State NJ	ZIP 07027	Country USA
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Michael P.		Dwyer	
Inventor's Signature		Date	
Residence: City Scotch Plains	State NJ	Country USA	Citizenship USA
<b>Mailing Address</b> 235 Katherine Street			
<b>Mailing Address</b>			
City Scotch Plains	State NJ	ZIP 07076	Country USA
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Ronald J.		Doll	
Inventor's Signature		Date	
Residence: City Convent Station	State NJ	Country USA	Citizenship USA
<b>Mailing Address</b> 8 Concord Lane			
<b>Mailing Address</b>			
City Convent Station	State NJ	ZIP 07960	Country USA

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Please type a plus sign (+) inside this box →

PTO/SB/02A (11-00)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

## DECLARATION

### ADDITIONAL INVENTOR(S) Supplemental Sheet Page 2 of 6

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Viyyoor M.		Girijavallabhan	
Inventor's Signature		Date	
Residence: City Parsippany	State NJ	Country USA	Citizenship USA
Mailing Address 10 Maplewood Drive			
Mailing Address			
City Parsippany	State NJ	ZIP 07054	Country USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Alan		Mallams	
Inventor's Signature		Date	
Residence: City Hackettstown	State NJ	Country USA	Citizenship USA
Mailing Address 147 Kings Highway, RR3			
Mailing Address			
City Hackettstown	State NJ	ZIP 07840	Country USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Carmen S.		Alvarez	
Inventor's Signature		Date	
Residence: City Livingston	State NJ	Country USA	Citizenship USA
Mailing Address 121 Walnut Street			
Mailing Address			
City Livingston	State NJ	ZIP 07039	Country USA

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Please type a plus sign (+) inside this box →

PTO/SB/02A (11-00)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

## DECLARATION

### ADDITIONAL INVENTOR(S) Supplemental Sheet Page 3 of 6

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Kartik M.		Keertikar	
Inventor's Signature		Date	
Residence: City East Windsor	State NJ	Country USA	Citizenship INDIA
Mailing Address 24 Columbia Avenue			
Mailing Address			
City East Windsor	State NJ	ZIP 08520	Country USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Jocelyn		Rivera	
Inventor's Signature		Date	
Residence: City Monmouth Junction	State NJ	Country USA	Citizenship USA
Mailing Address 72 Regal Drive			
Mailing Address			
City Monmouth Junction	State NJ	ZIP 08852	Country USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Tin-Yau		Chan	
Inventor's Signature		Date	
Residence: City Edison	State NJ	Country USA	Citizenship Hong Kong
Mailing Address 26 Barlow Road			
Mailing Address			
City Edison	State NJ	ZIP 08817	Country USA

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Please type a plus sign (+) inside this box →

PTO/SB/02A (11-00)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

## DECLARATION

### ADDITIONAL INVENTOR(S) Supplemental Sheet Page 4 of 6

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Vincent		Madison	
Inventor's Signature		Date	
Residence: City Mountain Lakes	State NJ	Country USA	Citizenship USA
Mailing Address 12 Ronarm Drive			
Mailing Address			
City Mountain Lakes	State NJ	ZIP 07046	Country USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Thierry O.		Fischmann	
Inventor's Signature		Date	
Residence: City Scotch Plains	State NJ	Country USA	Citizenship USA
Mailing Address 2700 Sky Top Drive			
Mailing Address			
City Scotch Plains	State NJ	ZIP 07076	Country USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Lawrence W.		Dillard	
Inventor's Signature		Date	
Residence: City Skillman	State NJ	Country USA	Citizenship USA
Mailing Address 278 Spring Hill Road			
Mailing Address			
City Skillman	State NJ	ZIP 08558	Country USA

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Please type a plus sign (+) inside this box → +

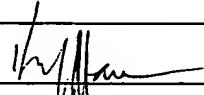
PTO/SB/02A (11-00)

Approved for use through 10/31/2002. OMB 0651-0032  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

## DECLARATION

### ADDITIONAL INVENTOR(S) Supplemental Sheet Page 5 of 6

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Vinh D. 		Tran	
Inventor's Signature		Date 10/7/03	
Residence: City Fountain Valley	State CA	Country USA	Citizenship USA
Mailing Address 17374 Winemast Street			
Mailing Address			
City Fountain Valley	State CA	ZIP 92708	Country USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Zhen Min		He	
Inventor's Signature		Date	
Residence: City Princeton	State NJ	Country USA	Citizenship USA
Mailing Address 5 Pennyroyal Court			
Mailing Address			
City Princeton	State NJ	ZIP 08540	Country USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Ray Anthony		James	
Inventor's Signature		Date	
Residence: City Bristol	State PA	Country USA	Citizenship USA
Mailing Address 1036 Radcliffe Street			
Mailing Address			
City Bristol	State PA	ZIP 19007	Country USA

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Please type a plus sign (+) inside this box →

PTO/SB/02A (11-00)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

## DECLARATION

### ADDITIONAL INVENTOR(S) Supplemental Sheet Page 6 of 6

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Haengsoon		Park	
Inventor's Signature		Date	
Residence: City Plainsboro	State NJ	Country USA	Citizenship Rep. of Korea
Mailing Address 8910 Tamarron Drive			
Mailing Address			
City Plainsboro	State NJ	ZIP 08536	Country USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Vidyadhar M.		Paradkar	
Inventor's Signature		Date	
Residence: City Somerville	State NJ	Country USA	Citizenship USA
Mailing Address 3 Pine Ridge Drive			
Mailing Address			
City Somerville	State NJ	ZIP 08876	Country USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Douglas Walsh		Hobbs	
Inventor's Signature		Date	
Residence: City Yardley	State PA	Country USA	Citizenship USA
Mailing Address 1330 University Drive			
Mailing Address			
City Yardley	State PA	ZIP 19067	Country USA

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.